								1	Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003													
				1/0724039									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL		
TOTAL CLAIMS			16				RA	RATE FEE		7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEI	385.00	O,R	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			(6 minus 20=		·		X\$	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		* φ		X4	3=		OR	X86=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT						1/	OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			TO	ΓAI		OR	TOTAL	120		
CLAIMS AS AMENDED - PART II									L	Jon	OTHER	THAN	
		(Column 1)		(Colum		(Column 3)	nn 3) SMAL		ENTITY	OR	SMALL		
AMENDMENTA	1/22/N	CLAIMS REMAINING AFTER		HIGH NUMI PREVIO	BER	PRESENT EXTRA	RATE	TE	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	AMENDMENT .	Minus	PAID I	FOR	a			FEE		24040	FEE	
	Independent	. 3	Minus	** 16		= (2)	X\$		/	ОR	X\$18=		
AN		NTATION OF MI		ب ر	CLAIM	4	X4:	3=	/	OR	X86=/		
1,8,13							+14	5=	<i>Y</i>	OR	+290=		
٠.	10115						ADDIT.	TAL FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colun		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER		HIGHI NUME PREVIO	BER	PRESENT EXTRA	RA	re .	ADDI- TIONAL		RATE	ADDI- TIONAL	
	Total	AMENDMENT	Minus	PAID F	-OH	= :	·X\$		FEE	ŀ	V640	FEE	
	Independent	*	Minus	***			-			OR	X\$18=		
ই	FIRST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT		CLAIM	X43=		)= 		OR	X86=			
							+14			OR	+290=		
							ADDIT.	TAL FÉE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)	• • •	. (Colum		(Column 3)							
Ž ŀ		CLAIMS REMAINING : AFTER AMENDMENT	٠.	HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	Total	*	Minus	**		8	X\$ 9			ام	X\$18=	FEE	
	Independent	*	Minus	***		=				OR			
4 [	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X43	_		OR	X86=		
• 14	the entry in eather	un 1 in loca than th			101 in		+145	i=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR ADDIT. FEE													
Ť	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	i o, eiller o. highest number	found in th	e app	ropriate box	in colu	ımn 1.		